

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SA		10-15-01
O.I.P.E. CLASSIFIER		49	10/29/01
FORMALITY REVIEW	TEL	SC1197	11/13/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☒ (Through-numeral)
☐ Canceled
☐ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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